



# REQUEST FOR ISSUANCE / TRANSFER OF INDIANA TRAINEE APPRAISER LICENSE

State Form 50670 (R / 1-03)

Indiana Professional Licensing Agency  
302 West Washington Street, Room E034  
Indianapolis, IN 46204-2700  
Telephone: 317-232-2980  
FAX: 317-232-2312

**IMPORTANT!** Applicant - you must return this completed form to the above address in order for a license to be issued.

## PART A (to be filled out by trainee applicant)

Date (month, day, year)	Telephone number	
Name of applicant	Trainee license number	
Address (number and street, city, state, ZIP code)		
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## PART B (to be filled out by employer) If no employer, please check here for an inactive license. ☐

Instructions: Prior to completing this section, please read IC 25-34.1 and 876 IAC (*Indiana statute and rules*) regarding prohibitions, supervision, and required use of licensed trainee appraisers.

Name of Supervising Appraiser
Business address (number and street, city, state, ZIP code)
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Indiana appraiser license number

## NOTARY CERTIFICATE

STATE OF \_\_\_\_\_

}SS

SEAL

COUNTY OF \_\_\_\_\_

I, \_\_\_\_\_, having been duly sworn on oath, say that I am the above-named supervising appraiser, and hereby certify that the individual named as the Applicant in Section A of this form is associated with myself as an Indiana licensed trainee appraiser. I further agree to return this licensed trainee appraiser's license to the Indiana Professional Licensing Agency within five (5) working days of the termination of the aforementioned association.

Signature of supervising appraiser	Signature of Notary Public	
Printed or typed name of supervising appraiser	Printed or typed name of Notary Public	
Date subscribed and sworn to Notary Public	County of residence	Date commission expires